

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 2094 OF 3572  
(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MRS. JOAN E. OLCOTT**

Mailing Address 10718 E. FENIMORE ROAD

|      |       |            |
|------|-------|------------|
| City | State | Zip Code   |
| MESA | AZ    | 85207-3231 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

R.N.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 12  | / | 2015    |

**Transaction ID : 2015M07L11AI06253**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. MR. NELSON M. OLF**

Mailing Address 2736 MAGNOLIA WAY

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| FOREST GROVE | OR    | 97116-1251 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 01  | / | 2015    |

**Transaction ID : 2015M07L11AI06254**

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

**C. MR. MICHAEL J. OLHAVA**

Mailing Address P.O. BOX 185

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| HEBRON | IL    | 60034-0185 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.64

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 16  | / | 2015    |

**Transaction ID : 2015M07L11AI06255**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

400.00

**TOTAL** This Period (last page this line number only)..... ►